



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9952

<b>SERIAL NUMBER</b> 10/525,771	<b>FILING OR 371(c) DATE</b> 02/28/2005 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3735	<b>ATTORNEY DOCKET NO.</b> 0011.1002
------------------------------------	---	---------------------	-------------------------------	---

**APPLICANTS**  
 You-In Kim, Chungcheongbuk-do, KOREA, REPUBLIC OF;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/KR03/01772 08/30/2003 ✓ @ 1/2/07

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 REPUBLIC OF KOREA 10-2002-0052213 08/31/2002 ✓ @ 1/2/07

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> KOREA, REPUBLIC OF	<b>SHEETS DRAWING</b> 18	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 2
---	---	---	-----------------------------	---------------------------	--------------------------------

Verified and Acknowledged *[Signature]* Examiner's Signature Initials

**ADDRESS**  
49455

**TITLE**  
Automatic blood pressure measuring instrument and method thereof

<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---